



Amendment Under 37 C.F.R. § 1.116  
Group Art Unit 2875, Expedited Procedure

In re Application of:

Docket No. 03500.014088.1

TAIKO MOTOI ET AL.

Application No.: 10/086,334

Examiner: Dalei Dong

Filed: March 4, 2002

Group Art Unit: 2875

For: ELECTRON-EMITTING DEVICE, ELECTRON  
SOURCE USING THE ELECTRON-EMITTING  
DEVICES, AND IMAGE-FORMING APPARATUS  
USING THE ELECTRON SOURCE

Date: November 5, 2003

Mail Stop AF  
THE COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

**COPY**

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 18	MINUS	** 20	0	x \$9 \$18	0
INDEP. CLAIMS	* 2	MINUS	*** 3	0	x \$43 \$86	0
Fee for Multiple Dependent claims \$145°/\$290						0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

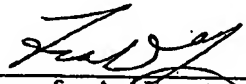
\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.
- ☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
\_\_\_\_\_  
Attorney for Applicants  
Registration No. 82 476

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3800  
Facsimile: (212) 218-2200



**COPY**

*Neil Stup AF*

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Date 11/15/03

Mo. Day Yr.  
03500, 0140821

Atty. Docket  
Application No. 10/086,334

Sir:

Kindly acknowledge receipt of the accompanying:

☒ Response to Official Action. 8-5-03

☐ Check for \$ \_\_\_\_\_ (claims fee)

☐ Petition under 37 CFR 1.136 and Check for \$ \_\_\_\_\_

☐ Notice of Appeal and Check for \$ \_\_\_\_\_

☐ Information Disclosure Statement, PTO-1449 and \_\_\_\_\_ documents

☐ Claim for priority and certified copies of \_\_\_\_\_ priority applications

☐ Issue fee transmittal and Check for \$ \_\_\_\_\_

☐ Other (specify) \_\_\_\_\_

by placing your receiving date stamp hereon and mailing or returning to deliverer.

Atty. FAD/mw

Due Date 12/15/03

37 CFR 1.8 ☒

37 CFR 1.10 ☐

By Hand ☐

FOI-B-00